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## **TRANSMITTAL FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number	09/658207
Filing Date	September 8, 2000
First Named Inventor	Robert J. Donaghey
Art Unit	2141
Examiner Name	L. H. Luu
Attorney Docket Number	BBNT-P01-109

ENCLOSURES (Check all that apply)					
x Fee Transi	mittal Form	Drawing(s)	After Allowance communication to Technology Center (TC)		
Fee A	Attached	Licensing-related Papers	Appeal Communication to Board of Appeals and Interferences		
Amendmer	nt/Reply	Petition	X Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After	Final	Petition to Convert to a Provisional Application	Proprietary Information		
Affida	avits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter		
x Extension	of Time Request	Terminal Disclaimer	X Other Enclosure(s) (please Identify below):		
Express At	bandonment Request	Request for Refund	Return Receipt Postcard		
Information	n Disclosure Statement	CD, Number of CD(s)			
Certified Control Document(	opy of Priority				
Response	to Missing Parts/ Application	Remarks			
	oonse to Missing Parts				
unde	r 37 CFR 1.52 or 1.53				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm ROPES & GRAY LLP Edward A. Gordon - 54,130					
Signature galaxie					
Date	October 18, 2004		·		

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below Dated: /0/18/04 Signature: Www. Ryan (Joanne Ryan)	
Dated:	<u> </u>

PTO/SB/17 (10-03)

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FEE TRANSMITTAL for FY 2004		Complete if Known						
		Application Number 09/658207						
		Filing Date				September 8, 2000		
		First Named Inv			entor Robert J. Donaghey		Donaghey	
Effective 10/01/2003. Patent fees are subject to annual revision.		Examiner Name		L. H. Luu	_			
Applicant claims small entity status. See 37 CFR 1.27	Art Unit			2141				
TOTAL AMOUNT OF PAYMENT (\$) 1,320.00		Attom	ey Doo	ket No	).	BBNT-P0	1-109	
METHOD OF PAYMENT (check all that apply)				FEE	CALCU	LATION (co	ntinued)	
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X Deposit Account:	Large	e Entity	Small	Entity				
Deposit Account 18-1945	Fee	Fee	Fee	Fee	•		•	
Number	Code		Code	(\$)		Fee Desc	ription	Fee Paid
Deposit Account Ropes & Gray LLP	1051	130	2051	65	Surcharge	- late filing fe	e or oath	
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge sheet.	- late provision	onal filing fee or cover	
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-Engli	n-English specification		
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a	request for exp	parte reexamination	
	1804	920*	1804	920*	Requestin Examiner	g publication o	of SIR prior to	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requestin	g publication o	of SIR after	
FEE CALCULATION	1251	110	2251	55	Examiner Extension	action for reply within	n first month	
1. BASIC FILING FEE	1252	420	2252			• •	second month	
Large Entity Small Entity	1253	950	2253			for reply within		980.00
Fee Fee Fee <u>Fee Description</u> Fee Paid	1254	1,480	2254			for reply within		
Code (\$) Code (\$) 1001 770 2001 385 Utility filing fee	1255	2,010	2255			for reply within		
1002 340 2002 170 Design filing fee	1401	330	2401		Notice of		· mar monar	340.00
1003 530 2003 265 Plant filing fee	1402	330	2402	165		ef in support o	f an anneal	040.00
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	-	or oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451		•		lic use proceeding	
	1452	110	2452	55		revive - unav		
SUBTOTAL (1) (\$) 0.00	1453	1,330	2453	665	Petition to	revive - uninte	entional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Utility issu	e fee (or reissu	ıe)	
Extra Fee from Claims below Fee Paid	1502	480	2502	240	Design iss	ue fee		
Total Claims -** = x =	1503	640	2503	320	Plant issue	e fee		
Independent= x = =	1460	130	1460	130	Petitions t	o the Commiss	sioner	
Multiple Dependent =	1807	50	1807	50	Processin	g fee under 37	CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806	180	Submissio	n of Informatio	on Disclosure Stmt	
Fee Fee Fee Fee Code (\$) Fee Description	8021	40	8021	40		each patent a	ssignment per of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	2809	385	Filing a su	bmission after		
1201 86 2201 43 Independent claims in excess of 3	1810	770	2810	385		additional inver		
1203 290 2203 145 Multiple dependent claim, if not paid 1204 86 2204 43 ** Reissue independent claims		770	2801	385		(37CFR 1.129	(b)) ixamination (RCE)	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	900	1802	900	· ·	or expedited e		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent		,		300	of a design	n application		
		fee (spec						
SUBTOTAL (2) (\$) 0.00  **or number previously paid, if greater; For Reissues, see above	*Redu	iced by E	Basic Fil	ling Fee	Paid	SUBTO	TAL (3) (\$)	1,320.00
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SUBMITTED BY	Regist	ration No	1	165		T	(if applicable))	
Name (Print/Type) Edward A. Gordon		ey/Agent)		,130		Telephone	(617) 951-7066	
Signature						Date	October 18, 200	)4

I hereby certify that this corresponde an envelope addressed to: Commis		Box 1450, Alexandria, VA 223	
Dated: 10/18/04	Signature:	Joanne Reja	(Joanne Ryan)
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